Debate

Resolving arguments about the sanctity of life: a response to Long

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Authors' abstract

Thomas Long has argued that there is an irreconcilable metaphysical difference between the views of those who, like ourselves, believe that on quality-of-life grounds it is sometimes justifiable to end the life of a severely handicapped infant, and those who, like Paul Ramsey, reject this view. Because of this metaphysical difference, Long considers it impossible for our arguments to refute Ramsey's position. We disagree.

In a recent article Thomas Long has examined the debate over infanticide for some severely handicapped infants (1). As the two opposing positions in this debate he selects the views of the theologian, Paul Ramsey, and our own position, as developed in our book Should the Baby Live? and in a subsequent conference paper (2,3). Long's objective is to show that our contribution to the debate on infanticide 'must fail to defeat [our] chosen opponent because the debate ultimately is about incommensurable metaphysical views'. We think Long is mistaken. While there are aspects of our position which draw upon metaphysical views different from those of Ramsey, we do not need to rely on those views in order to refute Ramsey's position.

Ramsey's position is summed up in the following passage, which Long quotes:

'There is no reason for saying that [six months in the life of a baby born with invariably fatal Tay Sachs disease] are a life span of lesser worth to God than living seventy years before the onset of irreversible degeneration All our days and years are of equal worth whatever the consequences; death is no more a tragedy at one time than at another time' (4).

This passage appears to be saying that all human life is of equal worth; neither its duration, nor its quality, makes a difference to how much it is to be valued. Long obviously reads the passage in the same way, and goes on to make the following crucial claim:

Key words

Infanticide; severely handicapped infants.

'The metaphysical disagreement between Kuhse-Singer and Ramsey is so basic that it causes certain criticisms of Ramsey simply to misfire. After quoting from Ramsey at the beginning of their article, Kuhse and Singer wonder whether anyone really believes that all life is of equal value and that quality-of-life considerations should not count. This is supposed to be a rhetorical question but it misfires simply because anyone who shares Ramsey's view of life as a gift in the image of God does find all life to be of equal value. It is for this reason that Ramsey insists that "allowing to die" is justifiable only "for the dying". And he believes that in permitting only the irreversibly dying to die we avoid invidious judgements about "quality-of-life struggles or prospects"."

Unfortunately for Long's argument, the final two sentences of this paragraph give us grounds for rejecting the remainder of it. They show that our rhetorical question does *not* misfire and that despite appearances, Ramsey's own judgements about particular situations are inconsistent with a belief in the equal value of all human life, and with the passage we quoted earlier.

To see this, we have only to spell out Ramsey's position a little more fully. As Long indicates, Ramsey is not opposed to 'allowing to die' in certain circumstances. Tay Sachs disease, in fact, is one of these circumstances, once it has reached a certain stage. Here is the way in which Ramsey concludes the discussion from which we quoted earlier:

'But from some point in the dying of Tay Sachs children they ought not to be stuck away in Jewish chronic disease hospitals and have their dying prolonged through tubes. The ethics of only caring for the dying holds without any modulation or modification in the case of a child no less than in that of an adult terminal patient who has entered upon the process of dying. No treatment is indicated when none exists that can do no more than prolong dying' (4). [Our italics]

Look back at the first passage we quoted from Ramsey, and compare it with this one, especially the final sentence. If all our days and years are of equal worth

whatever the consequence, then why are the days of life gained by treatments which 'prolong dying' not also of equal worth? After all, talk of 'prolonging dying' is really a misleading way of referring to treatments which prolong life, and it is only by this misleading use of language that Ramsey is able to conceal from at least some readers - Long, apparently, among them - the glaring contradiction between the passages we have quoted. We are all either alive or dead, and until we are dead, we are still alive. Of course, we would say that to gain extra days of life by continuing the treatment of babies in the last stages of Tay Sachs disease is not desirable because the quality of these extra days is so poor that they are without value for the infant, or for anyone else. To say this, however, is to abandon the view that all life is of equal value. When it comes to the crunch, that, in fact, is what Ramsey does. That he should do so is a credit to his humanity and compassion, but not to the consistency of his thinking (5).

Ramsey is not the only one who charges off with his allegiance to the doctrine of the equal value of human life emblazoned on his banner, only to shy away from the idea of prolonging a life which is of dismal quality and without prospects of improvement. In our book Should the Baby Live? we cite at length the court-room testimony of Dr C Everett Koop, Surgeon General of the United States in the Reagan administration and a champion of the Right to Life movement, in defending the 'Baby Doe' Guidelines. As we show there, Koop was forced to admit under cross-examination that in the case of an infant with 'essentially no intestine', he would not advocate that the infant be kept alive on hyper-alimentation for eighteen months or more. Yet this admission was plainly incompatible with the claim that all human life is of equal value, irrespective of its quality or prospects.

Perhaps there are some who take a theological view about the value of human life, and follow through this view consistently. If there are such people, it may be there is no way in which we can refute their position, short of refuting some of their theological premises, such as that there is a God and that this God holds certain views about the value of life. We will rest content if we show that such people are much more rare than is commonly assumed. Koop and Ramsey are not among them.

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References

- (1) Long T A. Infanticide for handicapped infants: sometimes it's a metaphysical dispute. Journal of medical ethics 1988; 14: 79-81.
- (2) Kuhse H, Singer P. Should the baby live? The problem of handicapped infants. Oxford: Oxford University Press, 1985.
- (3) Kuhse H, Singer P. For sometimes letting and helping -die. Law, medicine and health care 1986; 3,4: 1449-1453.
- (4) Ramsey P. Ethics at the edges of life. New Haven: Yale University Press, 1978: 191-192.
- (5) For more detailed discussion of this point see Kuhse H. The sanctity-of-life doctrine in medicine: a critique. Oxford: Oxford University Press, 1987: 183-195.